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PTO/SB/21 (09-04)

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/782,489	
	Filing Date	February 18, 2004	
	First Named Inventor	FANTON et al.	
	Art Unit	Unassigned	
	Examiner Name	Unassigned	
Total Number of Pages in This Submission	4	Attorney Docket Number	FAN-1 (027-001)

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Confirmation postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 50-1247.	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Signature			
Printed name	Jens E. Hoekendijk		
Date	March 23, 2005	Reg. No.	37,149

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Erica L. Canonizado	Date	March 23, 2005



Appl. No. 10/782,489
Amendment dated **March 23, 2005**

Date: **March 23, 2005**

I hereby certify that this is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

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Signed: *Erica L. Canonizado*
Erica L. Canonizado

Appl. No.	:	10/782,489
Applicant	:	FANTON et al.
Filed	:	February 18, 2004
Title	:	APPARATUS AND METHOD FOR CLEARING OBSTRUCTIONS FROM SURGICAL CUTTING INSTRUMENTS
TC/A.U.	:	Unassigned
Examiner	:	Unassigned
Docket No.	:	FAN-1 (027-001)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Examiner:

Prior to examination, please amend the above-identified application as follows:

Amendments to the Specification are shown at page 2 of this paper.

Amendments to the Claims: None.

Amendments to the Drawings: None

Remarks/Arguments begin on page 3 of this paper.